									^	pplication	1 or Docket Number		
PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 1997										20/.		00	CP#
									08/6			92	5/8/01
CLAIMS AS FILED - PART I								SMA	\LL	ENTITY	•	OTHE	RTHAN
(Column 1) (Column 2)								TY	PE		OR	SMALL	ENTITY
FOF	₹		NUMBER FILED			NUMBER	RATI	E	FEE		RATE	FEE	
			TO STORE STATE OF STA			Waster Co.				205.00		2.2	700.00
BAS	IC FEE								395.00	OR		790.00	
TOTAL CLAIMS			نے ا	25 mi	nus 20 =	. 5	- 	x\$11	=		OR	x\$22=	90-02
INDEPENDENT CLAIMS			<del>-</del>	/		· 2	x41:			2.5	x82=		
			444533		inus 3 =	~	1   ^~~		- }	OR	, XOZ-	160.00	
MULTIPLE DEPENDENT CLAIM P. SESENT								.] +135	==		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTA	L		OR	TOTAL	96000
												OTHE	R THAN
	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						SMA	\LL	ENTITY	OR		. ENTITY	
	AND THE REAL PROPERTY.		AIMS		<u>`</u>	GHEST	<u> </u>	] [		4001			4001
AMENDMENT A		1	VINING			JMBER	PRESENT EXTRA	RATE		ADDI- TIONAL		RATE	ADDI- TIONAL
		3	TER OMENT			VIOUSLY ID FOR	LXIIII			FEE			FEE
	Total	•		Minus	••		=	x\$11:	=		OR	x\$22=	
	Independent			Minus	1		=	x41=	:		OR	x82=	
	SISSE PRESENTATION OF MILITIPLE DI					NDENT CL	AIM	.125	1		OR	+270=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135:			On		
									AL L		OR A	TOTAL ADDIT. FEE	
		<u> </u>	mn 1)		C-31	olumn 2)	(Column 3)						
ENT B			UMS UNING			GHEST JMBER	PRESENT	RATE	.	ADDI- TIONAL		RATE	ADDI- TIONAL
			TER			VIOUSLY ID FOR	EXTRA	HAIE		FEE		TIXIC	FEE
		AMEN	DMENT			ID FOR		-			20		
2	Total	•		Minus	••		=	x\$11:			OR	x\$22=	
AMENDME	Independent	•		Minus	•••		=	x41=			OR	x82=	
ব	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135	=		OR	+270=	
								TOT	AL		OR ADDIT, FEE		
	•	(Colu	mn 1)		(C	olumn 2)	(Column 3)	ADDIT. FE	: C L		,	10011.1 66	
ر ن ک			IMS		1000	GHEST	PRESENT			ADDI-			ADDI-
			INING FER		2000	JMBER VIOUSLY	EXTRA	RATE		TIONAL FEE		RATE	TIONAL FEE
ָ בי		AMEN	DMENT		PA	ID FOR				ree			
AMENDMENT	Total	•		Minus			=	x\$11=	=		OR	x\$22=	
		•		10-	<del> </del>			x41=			OR	x82=	
	Indepandant			Minus			=		_		٠.,		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135:	=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paki For IN THIS SPACE is less than 20, enter "20."								TOTA			OR ,	TOTAL ADDIT, FEE	
"If the "Highest Number Previously Pald For" IN THIS SPACE is less than 20, enter "3."  ADDIT. FEE													
			,										

ADIDMITATOR TOOL STORES

50011 070 8-C (0 t. ADT)

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 1995

OB/G48 092

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY			OTHER THAN OR SMALL ENTITY			
FOF	3	<del></del>	BER FILED		NUMBER EXTRA			RATE	FEE	1	RATE	FEE		
BAS	SIC FEE	Marie San St.		The state of the s					375.00	OR		750.00		
ТОТ	TAL CLAIMS		1	us 20 =	*			x\$11=	-	OR	x\$22=			
INDE	EPENDENT CL	AIMS	( mir	nus 3 =	. —			x39=	<del>                                     </del>		x78=			
MULTIPLE DEPENDENT CLAIM PRESENT							]	+125=	<del> </del>	OR				
* If the difference in column 1 is less than zero, enter "0" in column 2								+125=		OR	+250=	<u> </u>		
											TOTAL			
CLAIMS AS AMENDED - PART II (Column 1) (Column 2)						(Column 3)	<u>໑</u>	SMALL	. ENTITY	OR		OTHER THAN SMALL ENTITY		
AMENDMENT A	B	CLAIMS REMAINING AFTER AMENDMENT	1,14	NU PRE	IGHEST UMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
NDN	Total	ids	Minus		20	=5	] [	x\$11=		OR	x\$22=	110		
<b>AME</b>	Independent	<u> </u>	Minus	*** <	3	= 3	] [	x39=		OR	x78=	234		
7	FIRST PRE	SENTATION OF	] [	+125=		OR	+250=	, ,						
		(Column 1)	Ai	TOTAL DDIT. FEE		OR ,	TOTAL ADDIT. FEE							
IENT B		CLAIMS REMAINING AFTER AMENDMENT		HIC NU PREV	olumn 2) GHEST JMBER VIOUSLY ID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
MENDMENT	Total	*	Minus	**		=		x\$11=	1	OR	x\$22=			
	Independent	*	Minus	***		=		x39=		OR	x78=			
٨	FIRST PRES	SENTATION OF		+125=		OR	+250=							
	TOTAL (Column 1) (Column 2) (Column 3) ADDIT. FEE										TOTAL ADDIT. FEE			
ENTC		CLAIMS REMAINING AFTER AMENDMENT		HIG NUI PREV	GHEST JMBER VIOUSLY ID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
NO.	Total	*	Minus	**		=		x\$11=		OR	x\$22=			
AMENDMENT	Independent	*	Minus	***		=		x39=		OR	x78=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +125=										+250=			
*** If th	If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													